

County: Anderson

## Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
CALLIE & JOHN RAINEY HOSPICE HOUSE 1835 ROGERS RD ANDERSON, SC 29621 MELBOURNE, PAMELA S PH#: 864-224-3358 Fac. Cont. Email:No Fac Cont. email on record	HPF-0001 / 08/31/2009 Anderson / Corporation 1835 ROGERS RD ANDERSON, SC 29621 HOSPICE OF THE UPSTATE INC	32

## Totals For Facility/License Type Hospice Facility

Number of Activities/Facilities licensed:	1	Number Licensed Units	32
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Number of Activities/Facilities licensed in county of Anderson	# Lics	1
Number Licensed Units :	32	

County: Charleston

## Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
HOSPICE CENTER OF HOSPICE OF CHARLESTON 676 WANDO PARK BOULEVARD MT PLEASANT, SC 29464 FEAGIN, ROSINA PH#: 800-677-2244 <b>Fac. Cont. Email:</b> No Fac Cont. email on record	HPF-0005 / 08/31/2009 Charleston / Ltd. Liability 12900 FOSTER STE 400 OVERLAND PARK, KS 66213 WIREGRASS HOSPICE OF SOUTH CAROLINA LLC	20

## Totals For Facility/License Type Hospice Facility

Number of Activities/Facilities licensed:	1	Number Licensed Units	20
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Number of Activities/Facilities licensed in county of	Charleston	# Lics	1
	Number Licensed Units :	20	

County: Florence

## Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
MCLEOD HOSPICE HOUSE 1203 E CHEVES ST FLORENCE, SC 29506 HARRISON-PAVY, JOAN PH#: 843-777-2564 Fac. Cont. Email: JPAVY@MCLEODHEALTH.ORG	HPF-0003 / 09/30/2009 Florence / Corporation PO BOX 100551 FLORENCE, SC 29501-0551 MCLEOD REGIONAL MEDICAL CENTER OF THE PEE DEE INC	12

## Totals For Facility/License Type Hospice Facility

Number of Activities/Facilities licensed:	1	Number Licensed Units	12
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Number of Activities/Facilities licensed in county of	Florence	# Lics	1
	Number Licensed Units :	12	

County: Georgetown

## Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
TIDELANDS COMMUNITY HOSPICE HOUSE 2591 N FRASER ST GEORGETOWN, SC 29440 HAYES, MARSHA A PH#: 843-546-3410 Fac. Cont. Email:MARSHA.HAYES@TIDELANDSHOSPICE.ORG	HPF-0008 / 01/31/2010 Georgetown / Non-Profit Corporation 2591 N FRASER ST GEORGETOWN, SC 29440 TIDELANDS COMMUNITY HOSPICE INC	12

## Totals For Facility/License Type Hospice Facility

Number of Activities/Facilities licensed:	1	Number Licensed Units	12
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Number of Activities/Facilities licensed in county of	Georgetown	# Lics	1
	Number Licensed Units :	12	

County: Greenville

Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee	Licensed Unit
MCCALL HOSPICE HOUSE OF GREENVILLE 1836 W GEORGIA RD SIMPSONVILLE, SC 29680 ROGERS, JAMES A PH#: 864-688-1700 <b>Fac. Cont. Email:</b> No Fac Cont. email on record	HPF-0010 / 07/31/2009 Greenville / Corporation 113 MILLS AVE GREENVILLE, SC 29605 ST FRANCIS HOSPITAL INC	30

## Totals For Facility/License Type Hospice Facility

Number of Activities/Facilities licensed:	1	Number Licensed Units	30
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Number of Activities/Facilities licensed in county of	Greenville	# Lics	1
	Number Licensed Units :	30	

County: Greenwood

## Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
HOSPICE HOUSE OF HOSPICECARE OF THE PIEDMONT INC 408 W ALEXANDER AVE GREENWOOD, SC 29646 CORLEY, NANCY B PH#: 864-227-9393 Fac. Cont. Email: NCORLEY@HOSPICEPIEDMONT.ORG	HPF-0002 / 05/31/2009 Greenwood / Non-Profit Corporation 408 W ALEXANDER AVE GREENWOOD, SC 29646 HOSPICECARE OF THE PIEDMONT INC	15

## Totals For Facility/License Type Hospice Facility

Number of Activities/Facilities licensed:	1	Number Licensed Units	15
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Number of Activities/Facilities licensed in county of	Greenwood	# Lics	1
	Number Licensed Units :	15	

County: Horry

## Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
AGAPE HOSPICE HOUSE OF HORRY COUNTY 2320 HWY 378 CONWAY, SC 29562 HOPE, CHARLENE E PH#: 843-397-2273 Fac. Cont. Email:CHOPE@AGAPESENIOR.COM	HPF-0016 / 03/31/2010 Horry / Corporation 2320 HWY 378 CONWAY, SC 29562 CAROLINAS COMMUNITY HOSPICE INC	24

## Totals For Facility/License Type Hospice Facility

Number of Activities/Facilities licensed:	1	Number Licensed Units	24
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Number of Activities/Facilities licensed in county of	Horry	# Lics	1
	Number Licensed Units :	24	

County: Laurens

Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
HOSPICE OF LAURENS COUNTY-HOSPICE HOUSE 1304 SPRINGDALE DR CLINTON, SC 29325 BROWN, LINDA R PH#: 864-833-6287 <b>Fac. Cont. Email:</b> No Fac Cont. email on record	HPF-0014 / 10/31/2009 Laurens / Corporation PO BOX 178 CLINTON, SC 29325 HOSPICE OF LAURENS COUNTY INC	12

## Totals For Facility/License Type Hospice Facility

Number of Activities/Facilities licensed:	1	Number Licensed Units	12
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Number of Activities/Facilities licensed in county of Laurens	# Lics	1
Number Licensed Units :	12	



County: Lexington

## Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
ASCENSION HOUSE INC 7142 WOODROW ST IRMO, SC 29063 WILLIAMS, ROGER W PH#: 803-796-9296 Fac. Cont. Email:ROGERW@ASCENSIONHOSPICE.COM	HPF-0009 / 06/30/2009 Lexington / Corporation PO BOX 1367 IRMO, SC 29063 ASCENSION HOUSE INC	14

## Totals For Facility/License Type Hospice Facility

Number of Activities/Facilities licensed:	1	Number Licensed Units	14
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Number of Activities/Facilities licensed in county of	Lexington	# Lics	1
	Number Licensed Units :	14	

County: Oconee

## Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
OCONEE HOSPICE OF THE FOOTHILLS COTTINGHAM HOUSE 220 TUCKER LN SENECA, SC 29672 SINES, TENNA R PH#: 864-882-8940 Fac. Cont. Email: TENNA.SINES@OCONEEMED.ORG	HPF-0011 / 09/30/2009 Oconee / Corporation 390 KEOWEE SCHOOL RD SENECA, SC 29672 OCONEE MEMORIAL HOSPITAL INC	15

## Totals For Facility/License Type Hospice Facility

Number of Activities/Facilities licensed:	1	Number Licensed Units	15
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Number of Activities/Facilities licensed in county of	Oconee	# Lics	1
	Number Licensed Units :	15	

County: Richland

## Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee	Licensed Unit
HEARTLAND HOSPICE HOUSE OF THE MIDLANDS 141 STONERIDGE DR COLUMBIA, SC 29210 LOMASTRO, BRIAN PH#: 803-939-2788 Fac. Cont. Email:No Fac Cont. email on record	HPF-0013 / 12/31/2009 Richland / Limited Liability 141 STONERIDGE DR COLUMBIA, SC 29210 IN HOME HEALTH LLC	12

## Totals For Facility/License Type Hospice Facility

Number of Activities/Facilities licensed:	1	Number Licensed Units	12
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Number of Activities/Facilities licensed in county of	Richland	# Lics	1
	Number Licensed Units :	12	

County: Spartanburg

Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
HOSPICE HOUSE OF THE CAROLINA FOOTHILLS 260 FAIRWINDS RD LANDRUM, SC 29356-9075 ECKERT, JEAN H PH#: 828-894-7000 <b>Fac. Cont. Email:</b> ASTERRITT@HOCF.ORG	HPF-0015 / 03/31/2010 Spartanburg / Non-Profit Corporation 130 FOREST GLEN RD COLUMBUS, NC 28722-3456 HOSPICE OF THE CAROLINA FOOTHILLS INC	12
SPARTANBURG REGIONAL HOSPICE HOME 686 JEFF DAVIS DR SPARTANBURG, SC 29303 DAWKINS, TRACEY L PH#: 864-560-5620 <b>Fac. Cont. Email:</b> RCOSTNER@SRHS.COM	HPF-0007 / 12/31/2009 Spartanburg / District 686 JEFF DAVIS DR SPARTANBURG, SC 29303 SPARTANBURG REGIONAL HEALTHCARE SYSTEM	15

## Totals For Facility/License Type Hospice Facility

Number of Activities/Facilities licensed:	2	Number Licensed Units	27
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Number of Activities/Facilities licensed in county of	Spartanburg	# Lics	2
	Number Licensed Units :	27	

County: York

## Facility Type: Hospice Facility

Facility Name	License Nbr/Expiration Date	
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Addres	
Administrator/Phone	Licensee	Licensed Unit

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HOSPICE & COMMUNITY CARE HOUSE	HPF-0012 / 12/31/2009	16
2275 INDIA HOOK RD	York / Corporation	
ROCK HILL, SC 29732	PO BOX 996	
ARMSTRONG, JAYNE M PH#: 803-329-4663	ROCK HILL, SC 29731	
Fac. Cont. Email: JANE@HOSPICECOMMUNITYCARE.ORG	CAROLINA COMMUNITY CARE INC	

## Totals For Facility/License Type Hospice Facility

Number of Activities/Facilities licensed:	1	Number Licensed Units	16
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Number of Activities/Facilities licensed in county of York	# Lics	1
Number Licensed Units :	16	

## Report Total

Total Number of Activities/Facilities licensed	14	Total Number Licensed Units	241
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